

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL	
OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated average burden hours per re	sponse 16.00



FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	SEC USI	E ONLY					
Prefix			Serial				
		ł					
DATE RECEIVED							

Name of Offering	(check if this is an am	endment and name h	as changed and inc	licate chan	ge)		
Ordinary shares	(Convert in this is all and	ondinon wild name it	us changes, and m	aroute entar	.50.7		
	ck box(es) that apply):	☐ Rule 504	☐ Rule 505	⊠ Ru	le 506	☐ Section 4(6)	□ ULOE
	☑ New Filing	☐ Amendment				,	
		A. BASIC ID	ENTIFICATION	DATA			
 Enter the information 	ation requested about the is	suer					
,	check if this is an amen	dment and name has	changed, and indic	ate change.	.)		
XINHUA FINAN							
	e Offices (Number and St	•				ne Number (Includin	ig Area Code)
Suite 2003-5, Vic	wood Plaza, 199 Des V	oeux Road Centra	al, Hong Kong		852-319	96-3939	_
	l Business Operations (Nu	nber and Street, City	, State, Zip Code)		Telepho	ne Number (In cl udin	ig Area Code)
(if different from Ex	ecutive Offices)						_
Same					<u> </u>	AND 13	<u> </u>
Brief Description of	Business				_	RECEIVED	
Investment holdi	ng				//		
Type of Business O	rganization				()	UCT Z ~ ZUC	Y 10/12
corporation	☐ limited partn	ership, already forme	ed □ oth	er (please	specify):	200	16 > > 1.
☐ business trust	☐ limited partn	ership, to be formed	 		<u>.</u>	1951	11-700° "
			Month Year			213 6	√ √ √ √ √ √ √ √ √ √ √ √ √ √ √ √ √
	Date of Incorporation or (•	0 1 0 4			Estimated 13 SE	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Jurisdiction of Incor	poration or Organization:				for State:		<i>''</i>
		CN for Canada: I	N for foreign juris	diction)		IF NA	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Pelino, Dennis Lindsay
Business or Residence Address (Number and Street, City, State, Zip Code)
10560 Wilshire Blvd, Suite 1802, Los Angeles, CA 90024, USA
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Bush, Loretta Fredy
Business or Residence Address (Number and Street, City, State, Zip Code)
No. 22 Lane 1768, Huai Hai Road Middle, 200031 Shanghai, People's Republic of China
Check Box(es) that Apply:
Full name (Last name first, if individual)
Wu, Ji Guang
Business or Residence Address (Number and Street, City, State, Zip Code)
35/F News Building, No. 2 Shennan Middle Road, Shenzhen, People's Republic of China
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☒ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Lie, Jae Young
Business or Residence Address (Number and Street, City, State, Zip Code)
Room 15D, Tower 3, 1500 Huaihai Central Road, Shanghai 200031, People's Republic of China
Check Box(es) that Apply:
Full name (Last name first, if individual)
Williams, John M.
Business or Residence Address (Number and Street, City, State, Zip Code)
31 Grey Shale, Plymouth, MA 02360, USA
Check Box(es) that Apply:
Full name (Last name first, if individual)
Singhal, Shelly Purings on Positions Address (Number and Street City State 7in Code)
Business or Residence Address (Number and Street, City, State, Zip Code) 610 Newport Center Drive, Suite 1205, Newport Beach, CA 92660, USA
Check Box(es) that Apply: Promoter Beach, CA 92000, USA Check Box(es) that Apply: Promoter Beach, CA 92000, USA Check Box(es) that Apply: General and/or Managing Partner
Full name (Last name first, if individual)
Sun Jiong
Business or Residence Address (Number and Street, City, State, Zip Code)
Room 501, 26-27 Kamiochiai, 2 Chome Shinjuku-ku, Tokyo, Japan 161-0034
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Li Shantong
Business or Residence Address (Number and Street, City, State, Zip Code)
No.225 Chaoyanmen Nei Street, Beijing 100010, People's Republic of China
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner Executive Officer ☐ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Lau, Gordon T. C.
Business or Residence Address (Number and Street, City, State, Zip Code)
Room 2504 No.6 Building of Dingxiang Apartment, Lane 800 Huashan Road, Shanghai, People's Republic of China

Check Box(es) that Apply: □ P	Promoter	r 🗷 Executive Officer	☐ Director	☐ General and/or Managing Partner						
Full name (Last name first, if indi	ividual)									
McLean, John										
Business or Residence Address (N	Number and Street, City, State,	Zip Code)								
Room 2003-5 Vicwood Plaza, 199 Des Voeux Road, Central, Hong Kong										
Check Box(es) that Apply: □ P	Promoter	r 🗷 Executive Officer	☐ Director	☐ General and/or Managing Partner						
Full name (Last name first, if indi	ividual)									
Connor, Michael										
Business or Residence Address (N	Number and Street, City, State,	Zip Code)								
2 Tower Hill Road, Morris Plains,	, NJ 07950, USA									
Check Box(es) that Apply: □ P	Promoter	Executive Officer	☐ Director	☐ General and/or Managing Partner						
Full name (Last name first, if indi	ividual)									
Worrall, Jonathan				<u></u>						
Business or Residence Address (N	Number and Street, City, State,	Zip Code)								
7114 Topsail Circle, Tega Cay, So	C 29708, USA									
Check Box(es) that Apply: □ P	Promoter	Executive Officer	☐ Director	☐ General and/or Managing Partner						
Full name (Last name first, if individual)										
Hartley, Jane										
Business or Residence Address (N	Number and Street, City, State,	Zip Code)								
820 Park Avenue, New York, NY	' 10021, USA									

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

		• "		B. I	NFORMAT	TON ABO	UT OFFER	RING				
											Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								. 🗆	×			
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?										27/4		
2. What is the minimum investment that will be accepted from any individual?									N/A			
											Yes	No
3. Does the offering permit joint ownership of a single unit?									E			
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If												
										e offering. If vith a state or		
										ons of such a		
			t forth the ir	nformation	for that brok	er or dealer	r only.					
Full name	(Last name	first, if ind	lividual)									
ъ :	- · · ·	411 (10: . 0:	0	<u> </u>						
Business	or Kesidenc	e Address (Number and	3 Street, Cil	y, State, Zij	o Code)						
Name of	Associated I	Broker or D	ealer									
States in \	Which Perso	on Listed H	as Solicited	or Intends	to Solicit Pu	ırchasers						
			individual :						••••••			All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full name	(Last name	first, if ind	lividual)									
Business	or Residenc	e Address (Number and	1 Street, Cit	y, State, Zip	Code)						
Name of A	Associated I	Broker or D	ealer									
States in V	Which Perso	on Listed H	as Solicited	or Intends	to Solicit Pu	ırchasers	<u> </u>				<u> </u>	
(Chec	k "All State	s" or check	individual	States)				***************************************	••••••			All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full name	(Last name	first, if ind	lividual)	-								
Business	or Residence	e Address (Number and	d Street, Cit	y, State, Zip	Code)						·
Name of	Associated I	Broker or D	 lealer						_			
			as Solicited								_	
			individual :						fE11			All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	already exchanged. Type of Security	C	Aggregate Offering Price	Aı	mount Already Sold
	Debt		G	\$	
	Equity	\$	1,800,000	\$	1,800,000
	☑ Common ☐ Preferred			_	
	Convertible Securities (including warrants)	\$		\$	0
	Partnership Interests	\$		\$	0
	Other (Specify)	\$		\$	0
	Total		1,800,000	\$	1,800,000
	Answer also in Appendix, Column 3, if filing under ULOE.			_	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Pollar Amount of Purchasers
	Accredited Investors			\$	1,800,000
	Non-accredited Investors	_	0	\$	0
	Total (for filings under Rule 504 only)	_	0	<u>\$</u>	0
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		-		
	Type of offering		Type of Security	D	ollar Amount Sold
	Rule 505		becarity	\$	Sold
	Regulation A	_		\$	_
	Rule 504	_		\$	
	Total	_		\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		_	\$	
	Printing and Engraving Costs			\$	
	Legal Fees			\$	
	Accounting Fees			\$	
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)			\$	
	Total			\$	

	C. OFFERING PRICE	E, NUMBER OF INVESTORS, EXPENSES AN	D USE	OF PROCEEDS	<u> </u>	
	b. Enter the difference between the aggr Question 1 and total expenses furnished in	gregate offering price given in response to Part response to Part C - Question 4.a. This differen	t C -		\$	1,800,000
5.	for each of the purposes shown. If the amo and check the box to the left of the estimate	gross proceeds to the issuer used or proposed to be ount for any purpose is not known, furnish an estimate. The total of the payments listed must equath in response to Part C - Question 4.b above.	imate		 -	
				Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees			\$		S S
				\$		<u>s</u>
		of machinery and equipment		\$		\$
	-	nd facilities		\$	- 🗀	<u>s</u>
	Acquisition of other businesses (including th	the value of securities involved in this offering that ecurities of another issuer pursuant to a merger)	ıt.	<u>*</u>	. –	
				<u>\$</u>	. E	\$ 1,800,000
	- ·			\$. 🗆	\$
	· .			\$		\$
Ot	ier (specify):					\$
				\$	×	\$ 1,800,000
To	al Payments Listed (column totals added)				X	\$ 1,800,000
						-
		D. FEDERAL SIGNATURE				
sig	nature constitutes an undertaking by the issue	ned by the undersigned duly authorized person. If the to furnish to the U.S. Securities and Exchange Caccredited investor pursuant to paragraph (b)(2) of	Commiss	sion, upon written	Rule 50 reques	05, the following st of its staff, the
XI	uer (Print or Type) NHUA FINANCE LIMITED	Signature	Date	17 October	200)6
	me of Signer (Print or Type) nn McLean	Title of Signer (Print or Type) General Counsel				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understand that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) XINHUA FINANCE LIMITED	Signature Date 17 October, 2006
Name of Signer (Print or Type) John McLean	Title #Signer (Print or Type) General Counsel

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3			4			5
	to non-a	ed to sell ccredited s in State Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Ordinary shares	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
CO				! 				1	
CT									
DE									
DC									
FL								ŀ	
GA									
HI		<u></u>							
ID									
ΙL	_								
IN	 								
IA									
KS									
KY		- 							
LA									
ME									
MD			<u></u>						
MA									
MI									
MN									
MS									
МО									
MT									

APPENDIX

1	2 3 4							:	5
13. 13.	to non-a	ed to sell accredited as in State 1-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Ordinary Shares	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NE									
NV								1	
NH									
NJ		х	\$1,800,000	2	\$1,800,000	0	0		х
NM				<u> </u>					
NY									
NC									
ND							_		
ОН									
OK	_								
OR									
PA									
RI									
SC									
SD									
TN									<u> </u>
TX								ļ	<u> </u>
UT	_			 					
VT									<u> </u>
VA									
WA									<u> </u>
WV						<u> </u>			<u> </u>
WI		<u> </u>							
WY							<u> </u>		
PR						.]			

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